

10/553996

JC12 Rec'd PCT/PTC 21 OCT 2005

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: AUTOMATIC DETECTION OF SKIN
LESIONS
Attorney Docket Number:: 2507-1074
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 13
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: CARMELO
Middle Name:: FRANCESCO
Family Name:: MELCHI
Name Suffix::
City of Residence:: ROMA
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA DEI MONTI DI CRETA, 104
Address::
City of Mailing Address:: ROMA
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00167

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: OSCAR
Middle Name::
Family Name:: BELLERINO
Name Suffix::
City of Residence:: POMEZIA (ROME)
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing VIA CARLO POMA 5
Address::
City of Mailing Address:: POMEZIA (ROME)

State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00040

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/IT2004/000217	4/15/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	RM2003A000184	4/22/03	Yes

Assignment Information

Assignee Name::
Street of Mailing
Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::